## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 200310829-1

As a below named invent r, I hereby declare that:

My residence/post office add	ress and citizenship are	as stated below next	to my name;
I believe I am the original, firs joint inventor (if plural name; patent is sought on the inven- DELIVERY OF DOCUMENTS T	s are listed below) of th tion entitled:	e subject matter wh	f below) or an original, first an ich is claimed and for which
•			
the specification of which is	attached hereto unless ti	he following box is ch	necked:
( ) was filed on			
Number	and was amend	ed on	(if applicable).
I hereby state that I have re including the claims, as amer disclose all information which	nded by any amendmen	t(s) referred to above	e. Lacknowledge the duty to
Foreign Application(s) and/or Claim or	-	•	
I hereby claim foreign priority benefit inventor(s) certificate listed below an a filing date before that of the applica-	d have also identified below a	ny foreign application for	ny foreign application(s) for patent o patent or inventor(s) certificate having
COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
·			YES: NO:
·			VES: NO:
Provisional Application			
I hereby claim the benefit under Title below:	35, United States Code Sect	tion 119(e) of any United	States provisional application(s) listed
	APPLICATION NUMBER	FILING DATE	7
			<b>-</b>
		•	7
information as defined in Title 37, Coopplication and the national or PCT int	ernational filing data of this ap	tion 1.56(a) which occurre optication:	d between the filing date of the prior
APPLICATION NUMBER	FILING DATE	STATUS (per	onred/pending/abanduned)
· · · · · · · · · · · · · · · · · · ·	-		
POWER OF ATTORNEY:  As a named inventor, I hereby appo- business in the Patent and Trademark (	int the following attorney(s) Office connected therewith:	and/or agant(s) to prosec	ute this application and transact ell
Customer Number	022879	Place Customer Number Bar Code	
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Intellectual Property Administration		David M. Mason	ì
P.O. Box 272400 Fort Collins, Cotorado 80527-2400		1408) 447-4046	
I hereby declare that all staten	nants made herein of m	v own knowledge pro	
made on information and beli with the knowledge that will imprisonment, or both, under s false statements may jeopardize	ef are believed to be tr Iful false statements ar Section 1001 of Title 11	ue; and further that t nd the like so made 8 of the United State	these statements were made a are punishable by fine or such willful
Full Name of Inventor: Philip A. Flocken		Citizonship: US	
	koop Street, #706, Dany	ver. Colorado 80202	
Post Office Address: same as re	sidential address		/
Inventor's Signature	epin	Date 10/28	12003
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